

EXHIBIT 8

38364 414

**SUBJECT TO TRANSFER AND RECORDATION TAXES BASED UPON THE
ASSESSED VALUE OF \$3,876,300**

DEED

THIS DEED (this "Deed"), dated as of June ~~25~~ 2016, from **MAGNOLIA GARDENS LIMITED LIABILITY COMPANY**, a Maryland limited liability company ("Grantor"), to **DOCTOR'S HOSPITAL, INC.**, a Maryland corporation ("Grantee").

WITNESSETH, That in and for the consideration of Ten Dollars (\$10.00), in hand paid and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Grantor hereby grants and conveys, in its "as is" condition, to Grantee, its successors and assigns, to have and to hold in fee simple, its right, title and interest in and to that property situate in Prince George's County, Maryland in the 21st Election District, State of Maryland as described on Exhibit A hereto (the "Property");

BEING all of the same property as was conveyed by deed dated February 28, 1996 to the within named Grantor and recorded among the Land Records of Prince George's County, Maryland on March 1, 1996, in Liber 10629, at folio 444;

TOGETHER WITH any buildings and improvements on the Property, and the rights, alleys, ways, waters, easements, privileges, appurtenances, and advantages, to the same belonging or appertaining thereto, including, without limitation, the easements benefitting the Property set forth in the Declaration of Easements recorded in the Land Records of Prince George's County, Maryland in Liber 32755, at folio 453;

TO HAVE AND TO HOLD the property hereby conveyed unto the Grantee, its successors and assigns, in fee simple, forever;

AND GRANTOR DOES NOT COVENANT OR WARRANT TITLE TO THE
PROPERTY;

AND this Deed may be executed in counterparts.

Clerk of the
Circuit Court

2016 JUL 11 PM 3:39

PR GEO CO MD #03

11563157-v1

LR - Deed (w Taxes)
Recording only \$120.00
Grantor/Grantee Name:
MAGNOLIA
GARDENS/DOCTORS
HOSPITAL
Reference/Control #: LR - Deed (with Taxes)
Surcharge 40.00
LR - Deed State
Transfer Tax 19,381.50
LR - Non-Resident Tax
- linked 0.00
SubTotal: 19,441.50
Total: 19,441.50
07/11/2016 03:38
#6504109 CC0703 -
Prince George's
County/CC07.03.02 -
Register 02
CC16-AS

PRINCE GEORGE'S COUNTY GOVT.
RECEIPT DATE 07/11/2016
ACCOUNT # 2355063
REVIEWER ID 006
RECEIPT # 9
PG DEED TAX 54,268.20
MD DEED TAX 21,320.75
PG TRUST #1 .00
MD TRUST #1 .00
PG TRUST #2 .00
MD TRUST #2 .00
PG TRUST #3 .00
MD TRUST #3 .00
PG TRUST #4 .00
MD TRUST #4 .00
AGRI TAX .00
TOTAL 75,588.95

Harbor City Research, Inc.
201 N. Charles St., Suite 900
Baltimore, MD 21201
V298556 7948

38364. 415

IN WITNESS WHEREOF, Grantor has executed this Deed as of the date first above written.

WITNESS:

GRANTOR:

**MAGNOLIA GARDENS LIMITED
LIABILITY COMPANY**

By: Doctor's Community Health Ventures,
Inc., Member

By: *Camille Bash* (SEAL)
Name: Camille Bash
Title: Authorized Representative

STATE OF Maryland)
) SS:
COUNTY OF Baltimore)

I HEREBY CERTIFY, that on this 13th day of June, 2016 before me, the undersigned, a Notary Public of the State aforesaid, duly qualified and commissioned as such, personally appeared Camille Bash, known to me (or satisfactorily proven) to be the duly authorized representative of Doctor's Community Health Ventures, Inc., whose name is subscribed to the within instrument and who acknowledged that she executed the foregoing Deed as the duly authorized representative of Doctors Community Health Ventures, Inc. for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal on the day and year first above mentioned.

Heidi Riedbauer
Notary Public
My Commission Expires: 10/8/2016



38364 416

By: Magnolia JV LLC, Member

By: Michael Berg (SEAL)
Name: Michael Berg
Title: Authorized Representative

STATE OF New Mexico)
COUNTY OF Bernalillo) SS:

I HEREBY CERTIFY, that on this 10 day of June, 2016 before me, the undersigned, a Notary Public of the State aforesaid, duly qualified and commissioned as such, personally appeared Michael Berg, known to me (or satisfactorily proven) to be the Authorized Representative of Magnolia JV LLC, whose name is subscribed to the within instrument and who acknowledged that he executed the foregoing Deed as the Authorized Representative of Magnolia JV LLC for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal on the day and year first above mentioned.

[Notarial Seal]



OFFICIAL SEAL
DENISE QUINTANA
NOTARY PUBLIC STATE OF NEW MEXICO
My commission expires: 6-11-19

Denise Quintana
Notary Public
My Commission Expires: 6-11-19

38364 417

CERTIFICATION

I HEREBY CERTIFY THAT I, the undersigned, an attorney at law who has been admitted to practice before the Maryland Court of Appeals, has prepared the within instrument.


Edward L. Wender

GRANTEE'S MAILING ADDRESS:

Doctor's Hospital, Inc.
8118 Good Luck Road
Lanham, Maryland 20706

AFTER RECORDING RETURN TO:

Edward L. Wender, Esquire
Venable LLP
750 East Pratt Street
Baltimore, Maryland 21202

EXHIBIT A

38364 418

LEGAL DESCRIPTION

BEING Part of Lot "4", as shown on a plat of subdivision entitled, "MAGNOLIA SPRINGS", recorded among the Land Records of Prince George's County, Maryland, in Plat Book SDH 3 at Plat No. 65, and being more particularly described as follows:

BEGINNING for the same at an iron pin set on the easterly or North 02° 46' 10" West, 1260.66 foot line of the aforesaid Lot "4" distant 631.06 feet southerly from the northerly end thereof, and running thence reversely with a part of said line

1. South 02° 45' 29" east, 582.26 feet to an iron pin set on the northerly right Right of Way Line of Good Luck Road, as shown on Prince George's County Public Works Right of Way Plats No. 664 and 665; thence with said northerly Right of Way Line
2. 199.28 feet along the arc of a curve, deflecting to the left, having a radius of 840.63 feet and a chord bearing North 83° 04' 43" West, 198.81 feet to an iron pin set on the westerly or North 02° 25' 50" West, 1187.62 foot line of said Lot "4", thence with a part of said line
3. North 02° 25' 09" West, 549.54 feet to an iron pin set; thence crossing said Lot "4"
4. North 87° 28' 00" East 192.73 feet to the place of beginning; containing 109,232 square feet or 2.5076 acres of land.

BEING all of that same property as was conveyed by Deed dated February 28, 1996 from Genesis Health Ventures of Lanham, Inc., a Pennsylvania Corporation to Magnolia Gardens Limited Liability Company, a Maryland Limited Liability Company, and recorded among the Land Records of Prince George's County, Maryland on March 1, 1996 in Liber 10629 at folio 444.

SAVING AND EXCEPTING THEREFROM, 1,197 square feet as conveyed unto Prince George's County by Deed recorded February 23, 2007 in Liber 27239 at folio 001.

Tax Account #21-2355063

NOW DESCRIBED, pursuant to an ALTA Survey, made by Ben Dyer Associates, dated, March 2014 as follows:

BEING Part of Lot "4", as shown on a plat of subdivision entitled, "MAGNOLIA SPRINGS", recorded among the Land Records of Prince George's County, Maryland, in Plat Book SDH 3 at Plat No. 65, and being more particularly described as follows, and as now surveyed:

BEGINNING for the same at a point on the easterly or North 02°46'10" West, 1260.66 foot line of the aforesaid Lot "4" distant 631.06 feet southerly from the northerly end thereof, and running thence reversely with a part of said line

1. South 02°45'29" East, 576.00 feet to a point on the northerly Right of Way Line of Good Luck Road, as shown on Prince George's County Public Works Right of Way Plats No. 664 and 665; thence with said northerly Right of Way Line
2. 199.19 feet along the arc of a curve, deflecting to the left, having a radius of 846.63 feet and a chord bearing North 83°08'54" West, 198.73 feet to a point on the westerly or North 02°25'50" West, 1187.62 foot line of said Lot "4", thence with part of said line
3. North 02°25'08" West, 543.54 feet to a point; thence crossing said Lot "4"

4. . North 87°27'00" East 192.73 feet to the place of beginning, containing 108,035 square feet or 2.4801 acres of land.

BEING all of that same property as was conveyed by Deed dated February 28, 1996 from Genesis Health Ventures of Lanham, Inc. a Pennsylvania Corporation to Magnolia Gardens Limited Liability Company, a Maryland Limited Liability Company, and recorded among the Land Records of Prince George's County, Maryland on March 1, 1996 in Liber 10629 at folio 444, saving and excepting therefrom, 1,197 square feet as conveyed unto Prince George's County by Deed recorded February 23, 2007 in Liber 27239 at folio 001.

AND TOGETHER with Easements for the right to use 35 parking spaces located on the Eastern Surface Parking Facilities, easements for utilities and encroachment easements, as more particularly described in a Declaration of Easement recorded in Liber 32755 at folio 453.

Tax Account #21-2355063

38364 421

**MARYLAND
FORM
WH-AR**

**Certification of Exemption from Withholding Upon
Disposition of Maryland Real Estate Affidavit of
Residence or Principal Residence**

2016

Based on the certification below, Transferor claims exemption from the tax withholding requirements of §10-912 of the Tax-General Article, Annotated Code of Maryland. Section 10-912 provides that certain tax payments must be withheld and paid when a deed or other instrument that effects a change

in ownership of real property is presented for recordation. The requirements of §10-912 do not apply when a transferor provides a certification of Maryland residence or certification that the transferred property is the transferor's principal residence.

1. Transferor Information
Name of Transferor MAGNOLIA GARDENS LIMITED LIABILITY COMPANY

2. Reasons for Exemption

Resident Status

☐

I, Transferor, am a resident of the State of Maryland.

☒

Transferor is a resident entity as defined in Code of Maryland Regulations (COMAR)03.04.12.02B(11), I am an agent of Transferor, and I have authority to sign this document on Transferor's behalf.

Principal Residence

☐

Although I am no longer a resident of the State of Maryland, the Property is my principal residence as defined in IRC 121 (principal residence for 2 (two) of the last 5 (five) years) and is currently recorded as such with the State Department of Assessments and Taxation.

Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct, and complete.

3a. Individual Transferors

Witness

Name

Signature

3b. Entity Transferors

Witness/Attest

MAGNOLIA GARDENS LIMITED LIABILITY COMPANY

Name of Entity

by: Magnolia JV LLC, Member

By

Michael Berg

Name

Authorized Representative

Title

State of Maryland Land Instrument Intake Sheet □ Baltimore City □ County: PRINCE GEORGE'S <i>Information provided is for the use of the Clerk's Office, State Department of Assessments and Taxation, and County Finance Office Only.</i> (Type or Print in Black Ink Only—All Copies Must Be Legible)																																																															
1 Type(s) of Instruments		<input type="checkbox"/> Check Box if addendum Intake Form is Attached.																																																													
		<input checked="" type="checkbox"/> Deed <input type="checkbox"/> Deed of Trust		<input type="checkbox"/> Mortgage <input type="checkbox"/> Lease		<input type="checkbox"/> Other _____		<input type="checkbox"/> Other _____																																																							
2 Conveyance Type Check Box		<input checked="" type="checkbox"/> Improved Sale Arms-Length [1]		<input type="checkbox"/> Unimproved Sale Arms-Length [2]		<input type="checkbox"/> Multiple Accounts Arms-Length [3]		<input type="checkbox"/> Not an Arms- Length Sale [9]																																																							
3 Tax Exemptions (if applicable)		Recordation _____ State Transfer _____ County Transfer _____ Cite or Explain Authority _____																																																													
4 Consideration and Tax Calculations		Consideration Amount Purchase Price/Consideration \$ 3,876,300.00 Any New Mortgage \$ _____ Balance of Existing Mortgage \$ _____ Other: \$ _____ Other: \$ _____ Full Cash Value: \$ _____				Finance Office Use Only Transfer and Recordation Tax Consideration Transfer Tax Consideration \$ _____ X () % = \$ _____ Less Exemption Amount - \$ _____ Total Transfer Tax = \$ _____ Recordation Tax Consideration \$ _____ X () per \$500 = \$ _____ TOTAL DUE \$ _____																																																									
5 Fees		Amount of Fees		Doc. 1		Doc. 2		Agent: _____ Tax Bill: _____ C.B. Credit: _____ Ag. Tax/Other: _____																																																							
		Recording Charge \$ 20.00 Surcharge \$ 40.00 State Recordation Tax \$ 21,320.75 State Transfer Tax \$ 19,381.50 County Transfer Tax \$ 54,268.20 Other \$ _____ Other \$ _____		\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____		\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____																																																									
6 Description of Property		District 21 Property Tax ID No. (1) 2355063 Grantor Liber/Folio 10629/444 Map 0035 Parcel No. 0000 Var. LOG <input type="checkbox"/> (5)		Subdivision Name _____ Lot (3a) _____ Block (3b) _____ Sect/AR (3c) _____ Plat Ref. _____ SqFt/Acreage (4) 2.4800 AC		Location/Address of Property Being Conveyed (2) 8200 GOOD LUCK ROAD, LANHAM, MARYLAND 20706 Other Property Identifiers (if applicable) _____ Water Meter Account No. _____ Residential <input type="checkbox"/> or Non-Residential <input checked="" type="checkbox"/> Fee Simple <input checked="" type="checkbox"/> or Ground Rent <input type="checkbox"/> Amount: _____ Partial Conveyance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description/Amt. of SqFt/Acreage Transferred: _____ If Partial Conveyance, List Improvements Conveyed: _____																																																									
7 Transferred From		Doc. 1 – Grantor(s) Name(s) MAGNOLIA GARDENS LIMITED LIABILITY COMPANY		Doc. 2 – Grantor(s) Name(s) _____ Doc. 1 – Owner(s) of Record, if Different from Grantor(s) _____ Doc. 2 – Owner(s) of Record, if Different from Grantor(s) _____																																																											
8 Transferred To		Doc. 1 – Grantee(s) Name(s) DOCTOR'S HOSPITAL, INC.		Doc. 2 – Grantee(s) Name(s) _____ New Owner's (Grantee) Mailing Address 8118 GOOD LUCK ROAD, LANHAM, MARYLAND 20706																																																											
9 Other Names to Be Indexed		Doc. 1 – Additional Names to be Indexed (Optional) _____		Doc. 2 – Additional Names to be Indexed (Optional) _____																																																											
10 Contact/Mail Information		Instrument Submitted By or Contact Person Name: JESSICA HANNON Firm: HARBOR CITY RESEARCH, INC. Address: 201 N. CHARLES STREET, SUITE 900, BALTIMORE, MARYLAND 21201 Phone: (800) 445-6029				<input checked="" type="checkbox"/> Return to Contact Person <input type="checkbox"/> Hold for Pickup <input type="checkbox"/> Return Address Provided																																																									
11 IMPORTANT: BOTH THE ORIGINAL DEED AND A PHOTOCOPY MUST ACCOMPANY EACH TRANSFER		Assessment Information Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Will the property being conveyed be the grantee's principal residence? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Does transfer include personal property? If yes, identify: _____ Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Was property surveyed? If yes, attach copy of survey (if recorded, no copy required).																																																													
		Assessment Use Only – Do Not Write Below This Line <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2">Terminal Verification</th> <th colspan="2">Agricultural Verification</th> <th colspan="2">Whole</th> <th colspan="2">Part</th> <th colspan="2">Tran. Process Verification</th> </tr> <tr> <td>Transfer Number</td> <td>Date Received:</td> <td>Deed Reference:</td> <td>Assigned Property No.:</td> <td>Year</td> <td>20</td> <td>20</td> <td>Geo.</td> <td>Map</td> <td>Sub</td> <td>Block</td> </tr> <tr> <td>Land</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Zoning</td> <td>Grid</td> <td>Plat</td> <td>Lot</td> </tr> <tr> <td>Buildings</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Use</td> <td>Parcel</td> <td>Section</td> <td>Occ. Cd.</td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Town Cd.</td> <td>Ex. St.</td> <td>Ex. Cd.</td> <td></td> </tr> </table>								Terminal Verification		Agricultural Verification		Whole		Part		Tran. Process Verification		Transfer Number	Date Received:	Deed Reference:	Assigned Property No.:	Year	20	20	Geo.	Map	Sub	Block	Land							Zoning	Grid	Plat	Lot	Buildings							Use	Parcel	Section	Occ. Cd.	Total							Town Cd.	Ex. St.	Ex. Cd.	
Terminal Verification		Agricultural Verification		Whole		Part		Tran. Process Verification																																																							
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Total							Town Cd.	Ex. St.	Ex. Cd.																																																						
REMARKS:		_____ _____ _____ _____ _____																																																													